

## Vendor Application Lanesboro Farmers Market



Saturdays 9 A.M. to Noon May - October Sylvan Park Lanesboro, MN

Business / Farm Name:		
Primary Seller Name:		
Name of additional sellers:		
Mailing Address:	County:	
City:	State/Zip	
Business Phone:	Alt Phone:	
Email:	Website:	
All items for sale must be grown, pro-	•	
If more space is needed pleas	en uco a congrato choot	
	ie use a separate sneet.	
Production/Growing Address		
if yes Are your items	Licence or Cort / Toy #	check if
organic or Organically grown?	License or Cert./ Tax #	Exempt
Baked, Canned or Processed items?		<del></del>
Nursery stock or perennials?		<del></del>
Processd or cured meats?		
Wild Mushrooms?		——  —
Crafts derived from Farm?		—— <u>—</u>
Are you a member of MN Grown?		

## **Membership Fees** check box \$60 Seasonal Fee (before May 1st and/or a single event only) \$70 Seasonal Fee (after May 1st and/or a special event only) \$30 For an additional stall Daily \$25 First day fee (can not be for a special event) \$10 Each additional day MUST BE RETURNED 1 WEEK PRIOR TO YOUR FIRST SELL DATE Please return the following items. Signed Application Other Documents, as need Copies of Applicable licenses and Permits Appropriate Payment **Total Amount Paid:** Check Number: Please make checks payable to Lanesboro Farmers Market Mail Application to the Market Managers **Emily Funke** Anita Bue 30329 Cty Rd 111 33971 State Hwy 30 Lewiston, MN 55952 Lanesboro, MN 55949 Phone 507-251-4902 Phone 507-450-9659 email: crookedpinegoods@gmail.com email: habuejr@yahoo.com I have read and understand the Lanesboro Farmers Market Policy and Procedures, agree to abide by them, and have received a copy of them. I understand that these rules may be amended from time to time and it is my responsibility to have the most current copy. I will leave my current mailing address with the manager so that I receive notice of changes and other necessary information about the operation of the Farmers Market. I understand that failure to abide by the Policies and Procedures may result in my disgualification, and this vendor's disqualification, from participation in the Farmers market. I agree that as a market vendor I will comply with all state, federal, and local including but not limited to labeling, scale requirements, egg temperature, sales tax and health codes. I will act in good faith to assure that all my Farmers Market customers are satisfied with the products I sell at the Market. I, for myself and for the business or entity I represent, agree that the City as Farmers market sponsor is not responsible to me or my business for any loss to my business or property due to power surges or power spikes. If I or my agents do not comply with the requirements for stall clean up, I agree that the city may perform the necessary clean up tasks and I will pay the clean up surcharge assessed against me and my stall for the cost of such clean up.

Date

Signature: